24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Mississippi Conservatives	C C00554774	
	M M / D D / Y Y Y Y	
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Capstone Public Affairs LLC	Date of Public Distribution/Dissemination	
	10 31 2014	
Mailing Address PO Box 2096	Amount	
City State Zip Code	1000.00	
Jackson MS 39225	Transaction ID : SE.4953 Date of Disbursement or Obligation	
Purpose of Expenditure Digital Advertisement Category/ Type	004 10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Suppor	rt Office Sought: House District:	
Thad Cochran Oppose	e President X Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought 8596.33	Disbursement For: Primary General 2014 Other (specify) ▶	
Full Name of Payee Winning Edge	Date of Public Distribution/Dissemination	
	10 30 7 2014	
Mailing Address PO Box 269	Amount	
City State Zip Code	6996.54	
Alexandria AL 36250	Transaction ID : SE.4954 Date of Disbursement or Obligation	
Purpose of Expenditure Mail Postage, Printing and Production Category/ Type 0	004 10 31 / Y Y Y Y Y Y	
Name of Federal Candidate Support	rt Office Sought: House District:	
Thad Cochran Oppose	e President Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought 15592.87	Disbursement For: Primary General 2014 Other (specify) ▶	
() QUIDTOTAL ()		
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······· >	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	Date 10 31 2014	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives	C C00554774
Check if X 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Winning Edge	10 30 / Y Y Y Y Y
Mailing Address PO Box 269	Amount
City State Zip Code	9232.31
Alexandria AL 36250	Transaction ID : SE.4955 Date of Disbursement or Obligation
Purpose of Expenditure Mail Postage, Printing and Production Category/ Type 004	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Thad Cochran Oppose	President State: MS
Calendar Year-To-Date Per Election for Office Sought Disb 24825.18	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Winning Edge	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 269	Amount
City State Zip Code	500.00
Alexandria AL 36250	Transaction ID : SE.4956 Date of Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement Category/ Type 004	10 31 7 2014
Name of Federal Candidate Support Office	ce Sought: House District:
Thad Cochran Oppose	President State: MS
Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	9732.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	17728.85
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Brian Perry [Electronically Filed] Signature	10 31 7 2014
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